

Town of Hampton

Application for Plumbing Permit

BUILDING ADDRESS _____ Map & Lot Number _____

BUILDING OWNER _____ Phone _____

Street _____ City _____ State _____ Zip _____

CONTRACTOR

Mailing Address:

NAME _____ Phone _____

Street _____ City _____ State _____ Zip _____

LICENSE # _____ Exp. Date _____

A SEPARATE MECHANICAL PERMIT IS REQUIRED FOR ALL HEATING SYSTEMS

TYPE OF CONSTRUCTION: NEW _____ REMODEL _____ ADDITION _____ ALTERATIONS _____

DESCRIPTION OF PROPERTY: ☐ Commercial ☐ Single dwelling unit ☐ Duplex (Two dwelling units in one or more buildings) ☐ Multi-family (Three or more dwelling units in one or more buildings)

DESCRIPTION OF WHAT YOU PLAN TO DO: _____

NUMBER OF BATHROOMS: Full Bath _____ Three-Quarter Bath _____ Half Bath _____

SEWER CONNECTIONS: Municipal Sewer ☐ Private Septic ☐

WHERE SHOULD THE PERMIT BE MAILED? _____ Owner _____ Contractor

I agree to comply with the Town of Hampton's Building and Zoning Ordinance and all work will be constructed in accordance with the New Hampshire State Building Code, and related Codes as adopted, and in accordance with the plans submitted.

Processing Fee \$25 plus \$5 per thousand (or any part of a thousand) of value of construction to be submitted with application.

Value of construction

I hereby certify, under penalty of perjury, that all statements given hereon are truthful and accurate, and that the cost of construction, alteration or remodeling (including labor and materials) is: \$ _____

SIGNATURE OF APPLICANT _____ DATE _____ / _____ / _____

FOR DEPARTMENTAL USE ONLY

FEE \$ _____ ☐ Cash _____ ☐ Check # _____

License checked Yes ☐ _____ No ☐ _____ ☐ _____

(Signed)

APPLICATION APPROVED (Building Official) _____ DATE _____ / _____ / _____